

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT** ▼Example: If typing, type
over the lines

PROLOGIC INC PAC

ADDRESS (number and street)
▼

1000 TECHNOLOGY DRIVE

SUITE 3140

☐Check if different
than previously
reported. (ACC)

FAIRMONT

WV

26554

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00369835

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☒Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

10

01

2005

through

10

31

2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAY REDDY

Signature of Treasurer

Electronically Filed by JAY REDDY

Date

03

01

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
PROLOGIC INC PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
1	0	3	1	2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2005		3210.95
(b) Cash on Hand at Beginning of Reporting Period	5167.95	
(c) Total Receipts (from Line 19)	1494.00	25951.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	6661.95	29161.95
7. Total Disbursements (from Line 31)	5000.00	27500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1661.95	1661.95
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
PROLOGIC INC PAC

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	5

To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	1350.00	22264.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	144.00	3687.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1494.00	25951.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	1494.00	25951.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1494.00	25951.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1494.00	25951.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		5000.00	27500.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		5000.00	27500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		5000.00	27500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	1494.00	25951.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1494.00	25951.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
PROLOGIC INC PAC

A. Full Name (Last, First, Middle Initial)
TIMOTHY COTTER

Mailing Address **16561 Blackhill Road**

City State Zip Code
Rixeyville VA 22737

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProLogic Inc.

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.4641

Amount of Each Receipt this Period

100.00

Semi Monthly Payroll

B. Full Name (Last, First, Middle Initial)

TIMOTHY COTTER

Mailing Address **16561 Blackhill Road**

City State Zip Code
Rixeyville VA 22737

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProLogic Inc.

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.4662

Amount of Each Receipt this Period

100.00

Semi Monthly Payroll

C. Full Name (Last, First, Middle Initial)

Mr. ROBERT COWLING

Mailing Address **112 COLLEEN CT NE**

City State Zip Code
LEESBURG VA 20176

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC INC.

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.4642

Amount of Each Receipt this Period

100.00

Semi Monthly Payroll

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PROLOGIC INC PAC

A. Full Name (Last, First, Middle Initial)
Mr. ROBERT COWLING
Mailing Address 112 COLLEEN CT NE

City State Zip Code
LEESBURG VA 20176

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC INC.

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.4663

Amount of Each Receipt this Period

100.00

Semi Monthly Payroll

B. Full Name (Last, First, Middle Initial)
Mr. CHETAN DESAI
Mailing Address 2042 Pinecrest Drive

City State Zip Code
Morgantown WV 26505

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProLogic, Inc.

Occupation
Lead Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.4644

Amount of Each Receipt this Period

50.00

Semi Monthly Payroll

C. Full Name (Last, First, Middle Initial)
Mr. CHETAN DESAI
Mailing Address 2042 Pinecrest Drive

City State Zip Code
Morgantown WV 26505

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProLogic, Inc.

Occupation
Lead Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.4665

Amount of Each Receipt this Period

50.00

Semi Monthly Payroll

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
PROLOGIC INC PAC

A. Full Name (Last, First, Middle Initial)
LARRY FRY

Mailing Address **2952 Elk Meadows Drive**

City State Zip Code
Brownsboro AL 35741

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC INC.

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.4645

Amount of Each Receipt this Period

20.00

Semi Monthly Payroll

B. Full Name (Last, First, Middle Initial)

LARRY FRY

Mailing Address **2952 Elk Meadows Drive**

City State Zip Code
Brownsboro AL 35741

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC INC.

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.4666

Amount of Each Receipt this Period

20.00

Semi Monthly Payroll

C. Full Name (Last, First, Middle Initial)

Mr. DANIEL GORDON

Mailing Address **12734 Knightsbridge Drive**

City State Zip Code
Woodbridge VA 22192

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProLogic, Inc.

Occupation
President, COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.4646

Amount of Each Receipt this Period

100.00

Semi Monthly Payroll

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROLOGIC INC PAC

A. Full Name (Last, First, Middle Initial)
Mr. DANIEL GORDON

Mailing Address 12734 Knightsbridge Drive

City State Zip Code
Woodbridge VA 22192

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProLogic, Inc.

Occupation
President, COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.4667

Amount of Each Receipt this Period

100.00

Semi Monthly Payroll

B. Full Name (Last, First, Middle Initial)

ANGELA HAWKINS

Mailing Address 363 Eustace Road

City State Zip Code
Stafford VA 22554

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC INC.

Occupation
Corporate Security Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.4648

Amount of Each Receipt this Period

50.00

Semi Monthly Payroll

C. Full Name (Last, First, Middle Initial)

ANGELA HAWKINS

Mailing Address 363 Eustace Road

City State Zip Code
Stafford VA 22554

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC INC.

Occupation
Corporate Security Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.4669

Amount of Each Receipt this Period

50.00

Semi Monthly Payroll

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROLOGIC INC PAC

A.

Full Name (Last, First, Middle Initial)

ROBERTS HESTON

Mailing Address 37105 Snickersville Turnpike
P.O. Box 267

City State Zip Code
Philomont VA 20131

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC INC

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.4649

Amount of Each Receipt this Period

20.00

Semi Monthly Payroll

B.

Full Name (Last, First, Middle Initial)

ROBERTS HESTON

Mailing Address 37105 Snickersville Turnpike
P.O. Box 267

City State Zip Code
Philomont VA 20131

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC INC

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.4670

Amount of Each Receipt this Period

20.00

Semi Monthly Payroll

C.

Full Name (Last, First, Middle Initial)

Mr. PAUL MAGUIRE

Mailing Address 15320 GULL COURT

City State Zip Code
Woodbridge VA 22191

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProLogic, Inc.

Occupation
Vice President, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.4651

Amount of Each Receipt this Period

120.00

Semi Monthly Payroll

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROLOGIC INC PAC

A. Full Name (Last, First, Middle Initial)
Mr. PAUL MAGUIRE

Mailing Address 15320 GULL COURT

City State Zip Code
 Woodbridge VA 22191

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProLogic, Inc.

Occupation
Vice President, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3420.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.4672

Amount of Each Receipt this Period

120.00

Semi Monthly Payroll

B. Full Name (Last, First, Middle Initial)
Mr. WILLIAM MYSINGER

Mailing Address 6131 SANDSTONE COURT

City State Zip Code
 CLIFTON VA 20124

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC, INC

Occupation
PROGRAM MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.4652

Amount of Each Receipt this Period

25.00

Semi Monthly Payroll

C. Full Name (Last, First, Middle Initial)
Mr. WILLIAM MYSINGER

Mailing Address 6131 SANDSTONE COURT

City State Zip Code
 CLIFTON VA 20124

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC, INC

Occupation
PROGRAM MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.4673

Amount of Each Receipt this Period

25.00

Semi Monthly Payroll

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROLOGIC INC PAC

A. Full Name (Last, First, Middle Initial)
CHARLES PORTER

Mailing Address 8031 GREAT RUN LANE

City State Zip Code
WARRENTON VA 20186

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC, INC.Occupation
VICE PRESIDENT, BIDS/PROPOSALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	1	/	2	0	0	5

Transaction ID: SA11A1.4653

Amount of Each Receipt this Period

50.00

Semi Monthly Payroll

B. Full Name (Last, First, Middle Initial)
CHARLES PORTER

Mailing Address 8031 GREAT RUN LANE

City State Zip Code
WARRENTON VA 20186

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC, INC.Occupation
VICE PRESIDENT, BIDS/PROPOSALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	5

Transaction ID: SA11A1.4674

Amount of Each Receipt this Period

50.00

Semi Monthly Payroll

C. Full Name (Last, First, Middle Initial)
RICHARD ROGERS

Mailing Address P.O. BOX 449

City State Zip Code
Shadyside MD 20764

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC INCOccupation
VP Strategic Initiatives

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	1	/	2	0	0	5

Transaction ID: SA11A1.4654

Amount of Each Receipt this Period

40.00

Semi Monthly Payroll

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROLOGIC INC PAC

A. Full Name (Last, First, Middle Initial)

RICHARD ROGERS

Mailing Address P.O. BOX 449

City

Shadyside

State

MD

Zip Code

20764

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROLOGIC INC

Occupation

VP Strategic Initiatives

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.4675

Amount of Each Receipt this Period

40.00

Semi Monthly Payroll

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

1350.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PROLOGIC INC PAC

Full Name (Last, First, Middle Initial)

A. LOT OF PEOPLE FOR DAVE OBEY

Mailing Address 525 WASHINGTON ST
PO BOX 1322

City WAUSAU State WI Zip Code 54402

Purpose of Disbursement
Contributions

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WI

District: 07

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.4692

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2005

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00